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|   |             |                          |                      |
|---|-------------|--------------------------|----------------------|
| <h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2002</h2> <p style="text-align: center;">Patent fees are subject to annual revision</p> |             | <b>Complete if Known</b> |                      |
|   |             | Application Number       | Unknown              |
|   |             | Filing Date              | Herewith             |
|   |             | First Named Inventor     | BILL MINSHALL ET AL. |
|   |             | Examiner Name            | Unknown              |
| TOTAL AMOUNT OF PAYMENT   | (\$) 355 00 | Group Art Unit           | Unknown              |
|   |             | Attorney Docket No.      | MINSH-001A           |

| METHOD OF PAYMENT  |                            | FEE CALCULATION (continued)  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
|--|----------------------------|--|----------------------------|----------------------------|---|-----------------|----------|--|--------|-------------------------------------|----------------------------------|-------------------|--------|---|----------------------------|------------------|---------|---------------------------|------------------------|--------------------|-----------|---|---------|------------------------|----------|--|--------|------------|------------|---|--|---------------------|--------|--|------|---------|---------|---|--|---------|---------|--|--|-----------|---------|---|--|-----------|---------|--|--|---------|---------|------------------|--|---------|---------|--|--|---------|---------|--------------------------|--|-----------|-----------|---|--|---------|--------|--------------------------------|--|-----------|---------|----------------------------------|--|-----------|---------|--------------------------------|--|---------|---------|------------------|--|---------|---------|-----------------|--|---------|---------|-------------------------------|--|--------|--------|---|--|---------|---------|--|--|--------|--------|--|--|---------|---------|---|--|---------|---------|--|--|---------|---------|---|--|---------|---------|---|--|---------------------------|--|--|--|------------------------------------|--|---------------------|------|
| <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <u>19-4330</u></p> <p>Deposit Account Name <u>Stetina Brunda</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p>   |                            | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105 130</td><td>205 65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127 50</td><td>227 25</td><td>Surcharge -late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139 130</td><td>139 130</td><td>Non-English specification</td><td></td></tr> <tr><td>147 2,520</td><td>147 2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>112 920*</td><td>112 920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113 1,840*</td><td>113 1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115 110</td><td>215 55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116 400</td><td>216 200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117 920</td><td>217 460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118 1,440</td><td>218 720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128 1,960</td><td>228 980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119 310</td><td>219 155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120 310</td><td>220 155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121 270</td><td>221 135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>136 1,510</td><td>138 1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140 110</td><td>240 55</td><td>Petition to revive-unavoidable</td><td></td></tr> <tr><td>141 1,240</td><td>241 620</td><td>Petition to revive-unintentional</td><td></td></tr> <tr><td>142 1,240</td><td>242 620</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143 440</td><td>243 220</td><td>Design issue fee</td><td></td></tr> <tr><td>144 600</td><td>244 300</td><td>Plant issue fee</td><td></td></tr> <tr><td>122 130</td><td>122 130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123 50</td><td>123 50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126 180</td><td>126 180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>581 40</td><td>581 40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146 710</td><td>246 355</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149 710</td><td>249 355</td><td>For each additional invention to be examined</td><td></td></tr> <tr><td>179 710</td><td>279 355</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169 900</td><td>169 900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="4">Other fee (specify) _____</td></tr> <tr> <td colspan="2">* Reduced by Basic Filing Fee Paid</td> <td><b>SUBTOTAL (3)</b></td> <td>\$ 0</td> </tr> </tbody> </table> |                            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$)                  | Fee Description | Fee Paid | 105 130  | 205 65 | Surcharge - late filing fee or oath |                                  | 127 50            | 227 25 | Surcharge -late provisional filing fee or cover sheet |                            | 139 130          | 139 130 | Non-English specification |                        | 147 2,520          | 147 2,520 | For filing a request for ex parte reexamination |         | 112 920*               | 112 920* | Requesting publication of SIR prior to Examiner action |        | 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action |  | 115 110             | 215 55 | Extension for reply within first month |      | 116 400 | 216 200 | Extension for reply within second month |  | 117 920 | 217 460 | Extension for reply within third month |  | 118 1,440 | 218 720 | Extension for reply within fourth month |  | 128 1,960 | 228 980 | Extension for reply within fifth month |  | 119 310 | 219 155 | Notice of Appeal |  | 120 310 | 220 155 | Filing a brief in support of an appeal |  | 121 270 | 221 135 | Request for oral hearing |  | 136 1,510 | 138 1,510 | Petition to institute a public use proceeding |  | 140 110 | 240 55 | Petition to revive-unavoidable |  | 141 1,240 | 241 620 | Petition to revive-unintentional |  | 142 1,240 | 242 620 | Utility issue fee (or reissue) |  | 143 440 | 243 220 | Design issue fee |  | 144 600 | 244 300 | Plant issue fee |  | 122 130 | 122 130 | Petitions to the Commissioner |  | 123 50 | 123 50 | Petitions related to provisional applications |  | 126 180 | 126 180 | Submission of Information Disclosure Statement |  | 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) |  | 146 710 | 246 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 710 | 249 355 | For each additional invention to be examined |  | 179 710 | 279 355 | Request for Continued Examination (RCE) |  | 169 900 | 169 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  | * Reduced by Basic Filing Fee Paid |  | <b>SUBTOTAL (3)</b> | \$ 0 |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description  | Fee Paid                   |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 105 130  | 205 65                     | Surcharge - late filing fee or oath  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 127 50   | 227 25                     | Surcharge -late provisional filing fee or cover sheet  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 139 130  | 139 130                    | Non-English specification  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 147 2,520  | 147 2,520                  | For filing a request for ex parte reexamination  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 112 920*   | 112 920*                   | Requesting publication of SIR prior to Examiner action   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 113 1,840*   | 113 1,840*                 | Requesting publication of SIR after Examiner action  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 115 110  | 215 55                     | Extension for reply within first month   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 116 400  | 216 200                    | Extension for reply within second month  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 117 920  | 217 460                    | Extension for reply within third month   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 118 1,440  | 218 720                    | Extension for reply within fourth month  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 128 1,960  | 228 980                    | Extension for reply within fifth month   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 119 310  | 219 155                    | Notice of Appeal   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 120 310  | 220 155                    | Filing a brief in support of an appeal   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 121 270  | 221 135                    | Request for oral hearing   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 136 1,510  | 138 1,510                  | Petition to institute a public use proceeding  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 140 110  | 240 55                     | Petition to revive-unavoidable   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 141 1,240  | 241 620                    | Petition to revive-unintentional   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 142 1,240  | 242 620                    | Utility issue fee (or reissue)   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 143 440  | 243 220                    | Design issue fee   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 144 600  | 244 300                    | Plant issue fee  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 122 130  | 122 130                    | Petitions to the Commissioner  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 123 50   | 123 50                     | Petitions related to provisional applications  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 126 180  | 126 180                    | Submission of Information Disclosure Statement   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 581 40   | 581 40                     | Recording each patent assignment per property (times number of properties)   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 146 710  | 246 355                    | Filing a submission after final rejection (37 CFR § 1.129(a))  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 149 710  | 249 355                    | For each additional invention to be examined   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 179 710  | 279 355                    | Request for Continued Examination (RCE)  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 169 900  | 169 900                    | Request for expedited examination of a design application  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Other fee (specify) _____  |                            |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| * Reduced by Basic Filing Fee Paid   |                            | <b>SUBTOTAL (3)</b>  | \$ 0                       |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>  |                            |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| <p><b>FEE CALCULATION</b></p> <p>1. BASIC FILING FEE</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101 740</td><td>201 370</td><td>Utility Filing fee</td><td></td></tr> <tr><td>106 330</td><td>206 165</td><td>Design Filing fee</td><td></td></tr> <tr><td>107 510</td><td>207 255</td><td>Plant Filing fee</td><td></td></tr> <tr><td>108 740</td><td>208 370</td><td>Reissue Filing fee</td><td></td></tr> <tr><td>114 160</td><td>214 85</td><td>Provisional Filing fee</td><td></td></tr> <tr><td colspan="3"><b>SUBTOTAL (1)</b></td><td>\$ 355 00</td></tr> </tbody> </table>   |                            | Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description            | Fee Paid                                    | 101 740         | 201 370  | Utility Filing fee                             |        | 106 330                             | 206 165                          | Design Filing fee |        | 107 510   | 207 255                    | Plant Filing fee |         | 108 740                   | 208 370                | Reissue Filing fee |           | 114 160   | 214 85  | Provisional Filing fee |          | <b>SUBTOTAL (1)</b>                                    |        |            | \$ 355 00  |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description  | Fee Paid                   |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 101 740  | 201 370                    | Utility Filing fee   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 106 330  | 206 165                    | Design Filing fee  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 107 510  | 207 255                    | Plant Filing fee   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 108 740  | 208 370                    | Reissue Filing fee   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 114 160  | 214 85                     | Provisional Filing fee   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| <b>SUBTOTAL (1)</b>  |                            |  | \$ 355 00                  |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| <p>2. EXTRA CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims - 20** = _____ X _____ = _____</td> <td></td> <td></td> </tr> <tr> <td>Independent Claims - 3 = _____ X _____ = _____</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent _____ = _____</td> <td></td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103 18</td><td>203 9</td><td>Claims in excess of 20</td></tr> <tr><td>102 84</td><td>202 42</td><td>Independent claims in excess of 3</td></tr> <tr><td>104 280</td><td>204 140</td><td></td></tr> <tr><td>109 80</td><td>209 40</td><td></td></tr> <tr><td>110 18</td><td>210 9</td><td></td></tr> <tr><td colspan="3"><b>SUBTOTAL (2)</b></td><td>\$ 0</td></tr> </tbody> </table> |                            | Extra Claims   | Fee from below             | Fee Paid                   | Total Claims - 20** = _____ X _____ = _____ |                 |          | Independent Claims - 3 = _____ X _____ = _____ |        |                                     | Multiple Dependent _____ = _____ |                   |        | Large Entity Fee Code (\$)                            | Small Entity Fee Code (\$) | Fee Description  | 103 18  | 203 9                     | Claims in excess of 20 | 102 84             | 202 42    | Independent claims in excess of 3               | 104 280 | 204 140                |          | 109 80   | 209 40 |            | 110 18     | 210 9   |  | <b>SUBTOTAL (2)</b> |        |  | \$ 0 |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Extra Claims   | Fee from below             | Fee Paid   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Total Claims - 20** = _____ X _____ = _____  |                            |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Independent Claims - 3 = _____ X _____ = _____   |                            |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Multiple Dependent _____ = _____   |                            |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 103 18   | 203 9                      | Claims in excess of 20   |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 102 84   | 202 42                     | Independent claims in excess of 3  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 104 280  | 204 140                    |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 109 80   | 209 40                     |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| 110 18   | 210 9                      |  |                            |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |
| <b>SUBTOTAL (2)</b>  |                            |  | \$ 0                       |                            |   |                 |          |  |        |                                     |                                  |                   |        |   |                            |                  |         |                           |                        |                    |           |   |         |                        |          |  |        |            |            |   |  |                     |        |  |      |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                |  |           |         |                                  |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |  |  |        |        |  |  |         |         |   |  |         |         |  |  |         |         |   |  |         |         |   |  |                           |  |  |  |                                    |  |                     |      |

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